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PTO/SB/97 (09-04)

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09/691549

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PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/691549
	Filing Date	10/18/2000
	First Named Inventor	Jackson
	Art Unit	2132
	Examiner Name	Dinh
	Attorney Docket Number	120-208
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Steubing McGuinness & Manaras LLP	
Signature	<i>Mary Steubing</i>	
Printed name	Mary Steubing	
Date	6-29-05	Reg. No. 37,946

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Typed or printed name	Mary Steubing	Date 6/29/05

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PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/691549
	Filing Date	10/18/2000
	First Named Inventor	Jackson
	Art Unit	2132
	Examiner Name	Dinh
	Attorney Docket Number	120-208
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: please charge any fee deficiencies or credit any overpayment to Dep Acct 500569		
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Jackson

Application No.: 09/691549

Filed: 10/18/2000

Title: Local Firewall Apparatus and Method

Attorney Docket No.: 2204/A61 120-208
12304RN

Group Art Unit: 2132

Examiner: Dinh

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JUN 29 2005

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450RESPONSE UNDER 37 CFR 1.111

Dear Sir:

In response to the Office Action of March 1, 2005, please amend this application as follows.